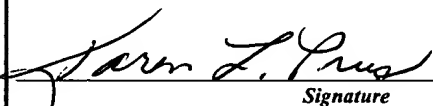



AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. PB1517US3	
Applicant(s): Daluge, et. al.					
Serial No. 08/957,045	Filing Date October 24, 1997	Examiner M. Berch		Group Art Unit 1611	
Invention: CHLOROPYRIMIDINE INTERMEDIATES AND PROCESSES FOR THEIR PREPARATION					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	6 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0 x	\$78.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1392 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Karen L. Prus, Ph.D. Reg. No. 39,337 Glaxo Wellcome Inc. Global Intellectual Property Department Five Moore Drive, P.O. Box 13398 Research Triangle Park, NC 27709-9602 Tel: 919/483-2192 Fax: 919/483-7988			Dated: <i>March 10, 2000</i> <div style="text-align: right;">  Joyce Hartnett Typed or Printed Name of Person Mailing Correspondence </div>		

CC: